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DEMINISTRATION AND A PROPERTY AND A			Application Number		09/998,481	
TRANSMITTAL			Filing Date		November 30, 2001	
FORM  (to be used for all correspondence		filing)	First Named Inventor		Barany et al.	
(to be used for all correspondence after initial filing)			Group Art Unit		1637	
			Examiner Name		Joyce Tung	
Total Number of Pages in This Sub-	mission 25		Attorney Docket Number		19603/3331 CRF D-2634A	
Total Number of Tage		ENCLOSU	RES (check all that apply)			
Fee Transmittal Form  Fee Attached  Amendment (20 pages) ( Exhibit)  After Final  Affidavits/declaration(s)  One Month Extension of Time Request (\$120.00)  Express Abandonment Request  Information Disclosure Statement (w/10 References) (\$180.00)  Certified Copy of Priority Document(s)  Response to Notice to File Missing Parts/ Incomplete Application (\$)  A copy of the Notice to File Missing Parts under 37 CFR 1.52 or 1.53		Assignment Papers (for an Application)  Drawing(s)  Declaration and Power of Attorney  Licensing-related Papers  Petition (\$)  Petition to Convert to a Provisional Application  Power of Attorney, Revocation Change of Correspondence Address  Terminal Disclaimer (\$)  Request for Refund  CD, Number of CD(s)		s here	acknowledging receipt	
		<u> </u>	above identified docket nu	ambe	г.	
Firm or Individual name	Noreen L. Connolly Nixon Peabody LLP Clinton Square, P.O. Box 31051 Rochester, New York 14603-1051 Telephone: (585) 263-1597 Fax: (585) 263-1600  Registration No. 48,987					
Signature	hores	~ X	Convolly			
Date	au	e as d	1 29 2005	5_		
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Date			Signature Angelica Grouse			

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## TRANSMITTAL

FORM
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1	Application Number	09/998,481
	Filing Date	November 30, 2001
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	]	ENCLOSU	RES (check all that apply)			
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One Month Extension of Time (\$120.00)  Express Abandonment Request Information Disclosure Statemer References) (\$180.00)  Certified Copy of Priority Document(s)  Response to Notice to File Mis Incomplete Application (\$	ent (w/10 ssing Parts/	Change Termin	of Attorney, Revocation of Correspondence Address nal Disclaimer (\$) st for Refund number of CD(s)	Request for Corrected Filing Receipt with Enclosures  A self-addressed, prepaid postcard for acknowledging receipt  Check in the amount of \$  Other Enclosure(s) (please identify below):  s hereby authorized to charge any additional fees repayments to Deposit Account No. 14-1138 for the umber.		
	SIGNATI	URE OF AP	PLICANT, ATTORNEY	OR AGENT		
Firm or Individual name	Noreen L Nixon Pe Clinton S Rocheste Telephor	L. Connolly eabody LLP Square, P.O. er, New Yor ne: (585) 26	Box 31051 k 14603-1051 i3-1597			
Signature	Fax: (58	35) 263-1600 Ba	Convolly	Registration No. 48,987		
Date	au	eg ust	29, 200	5		
CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]  I hereby certify that this correspondence is being:  deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment Commissioner for Patents, P. O Box 1450, Alexandria, VA 22313-1450  transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at (703)  Date  Signature  Angelica Grouse  Typed or printed name						